

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)USE FEC MAILING LABEL
OR TYPE OR PRINT ▼Example: If typing, type
over the lines

Nita Lowey for Congress

ADDRESS (number and street)
▼

PO Box 271

☐Check if different
than previously
reported. (ACC)

White Plains

NY

10605

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00219881

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

NY

18

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☒

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

04

01

2006

through

06

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Richard Melnikoff

Signature of Treasurer

Electronically Filed by Richard Melnikoff

Date

07

15

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Nita Lowey for Congress

Report Covering the Period:

From:

M M
0 4D D
0 1Y Y Y Y
2 0 0 6

To:

M M
0 6D D
3 0Y Y Y Y
2 0 0 6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	229397.12	991445.92
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	5200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	229397.12	986245.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	74056.68	790887.94
(b) Total Offsets to Operating Expenditures (from Line 14).....	318.73	538.26
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	73737.95	790349.68
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1072272.75	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

Nita Lowey for Congress

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	6

I. RECEIPTS

COLUMN A
Total This PeriodCOLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

185000.00

733680.00

(ii) Unitemized.....

4855.00

65499.00

(iii) TOTAL of contributions

189855.00

799179.00

from individuals..... ►

49.12

273.92

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACS).....

39493.00

191993.00

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

229397.12

991445.92

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING

EXPENDITURES

(Refunds, Rebates, etc.).....

318.73

538.26

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

3586.17

21698.55

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)..... ►

233302.02

1013682.73

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	74056.68	790887.94
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	5050.00
(b) Political Party Committees.....	0.00	150.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5200.00
21. OTHER DISBURSEMENTS.....	3375.00	331974.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ➤	77431.68	1128061.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	916402.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	233302.02
25. SUBTOTAL (add Line 23 and Line 24).....	1149704.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	77431.68
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1072272.75

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Irving Angerman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 16 Easthaven Lane		Transaction ID: C6642767
City White Plains	State NY	Zip Code 10605
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Harris Bak		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 132 Overlook Road		Transaction ID: C6642766
City New Rochelle	State NY	Zip Code 10804-4139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Milliman USA	Occupation Actuary	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

C. Full Name (Last, First, Middle Initial) Harris Bak		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 132 Overlook Road		Transaction ID: C6642768
City New Rochelle	State NY	Zip Code 10804-4139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Milliman USA	Occupation Actuary	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Paul L. Baker

Mailing Address 333 E. Speedway Blvd

City State Zip Code
Tucson AZ 85716

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642798

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Sanford Batkin

Mailing Address 394 Grand Boulevard

City State Zip Code
Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Universal Folding Box Co.

Occupation
Executive

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690811

Amount of Each Receipt this Period

850.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Sanford Batkin

Mailing Address 394 Grand Boulevard

City State Zip Code
Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Universal Folding Box Co.

Occupation
Executive

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690812

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Joel Beckman

Mailing Address 75 Garden Road

City State Zip Code
 Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greenbriar Equity Group
LLC

Occupation
Investment Management

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642765

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Richard Bemporad

Mailing Address 8 Hadley Road

City State Zip Code
 Armonk NY 10504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lowey Dannenberg Bemporad
et al

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642752

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Darel M Benaim

Mailing Address 11 Broad Brook Road

City State Zip Code
 Bedford Hills NY 10507

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York University

Occupation
Psychoanalyst

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642756

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 8 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Gail Bendheim Mailing Address 65 Challenger Road Suite 3 City State Zip Code Ridgefield Park NJ 07660 FEC ID number of contributing federal political committee. C Name of Employer Philipp Brothers Chemicals Inc Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: C6690861 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Max W Berger Mailing Address 200 East 71st Street City State Zip Code New York NY 10021 FEC ID number of contributing federal political committee. C Name of Employer Bernstein Litowitz Berger et al Occupation Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: C6690776 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Robert Bernhard Mailing Address 800 Park Avenue City State Zip Code New York NY 10021 FEC ID number of contributing federal political committee. C Name of Employer Bernhard Management Corporation Occupation Investment Banker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6 Transaction ID: C6642166 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Stanley S Bernstein

Mailing Address 300 Trenor Drive

City State Zip Code
 New Rochelle NY 10804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bernstein Liebhard & Lifshitz

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642764

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Marjorie Beyersdorf

Mailing Address 5 Fairview Road

City State Zip Code
 Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Librarian

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642167

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Kenneth L Bialkin

Mailing Address 211 Central Park West

City State Zip Code
 New York NY 10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Skaaden Arps et al

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 8 / 2 0 0 6

Transaction ID: C6646372

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 10 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Ronald Binday Mailing Address 32 Cooper Road City State Zip Code Scarsdale NY 10583 FEC ID number of contributing federal political committee. C Name of Employer Advocate Brokerage Corp Occupation Insurance Broker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6 Transaction ID: C6642763 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Ernest Bogen Mailing Address 5055 Collins Avenue City State Zip Code Miami Beach FL 33140 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6 Transaction ID: C6642794 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Marshall Butler Mailing Address 969 Fifth Avenue City State Zip Code New York NY 10021 FEC ID number of contributing federal political committee. C Name of Employer Infinity Venture Capital Occupation Partner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 6 Transaction ID: C6647036 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)

Beverly G Cannold

Mailing Address One North Breakers Row
#161

City State Zip Code
Palm Beach FL 33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642792

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

David Cannold

Mailing Address 3010 Westchester Avenue

City State Zip Code
Purchase NY 10577

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642791

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Nicholas Cavarocchi

Mailing Address 10201 Grosvenor Place

City State Zip Code
Rockville MD 20852

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cavarocchi Ruscio Dennis
Associates

Occupation
Partner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690832

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Albert Chance

Mailing Address 2 Piping Brook Lane

City State Zip Code
 Bedford NY 10506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642777

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. David Chapnick

Mailing Address 22 Larchmont Avenue

City State Zip Code
 Larchmont NY 10538

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 2 9 / 2 0 0 6

Transaction ID: C6688897

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. David Chapnick

Mailing Address 22 Larchmont Avenue

City State Zip Code
 Larchmont NY 10538

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 2 9 / 2 0 0 6

Transaction ID: C6688892

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Elaine Chapnick
Mailing Address 22 Larchmont Avenue

City State Zip Code
Larchmont NY 10538

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 6

Transaction ID: C6638824

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert A. Cohen
Mailing Address 22 Byron Lane

City State Zip Code
Larchmont NY 10538-1618

FEC ID number of contributing
federal political committee.

C

Name of Employer
R.A. Cohen & Associates,
Inc.

Occupation
President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642776

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Andrea Collins
Mailing Address 384 New Rochelle Road

City State Zip Code
Bronxville NY 10708

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6696762

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Andrea Collins Mailing Address 384 New Rochelle Road City State Zip Code Bronxville NY 10708 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: C6696764 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Tim Collins Mailing Address 384 New Rochelle Road City State Zip Code Bronxville NY 10708 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: C6696769 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Tim Collins Mailing Address 384 New Rochelle Road City State Zip Code Bronxville NY 10708 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: C6696766 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

6300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Betty Cotton		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 86 Sheldrake Road		Transaction ID: C6690799
City Scarsdale	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation NFP Management Consultant	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Betty Cotton		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 86 Sheldrake Road		Transaction ID: C6690801
City Scarsdale	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1900.00
Name of Employer Self-Employed	Occupation NFP Management Consultant	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Cow Creek Band of Umpqua Tribe of Indians		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 2371 N.E. Stephens St., Suite 100		Transaction ID: C6717939
City Roseburg	State OR	Zip Code 97470
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4100.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Ruth Cowan		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 320 Central Park West #8G		Transaction ID: C6690850
City New York	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer American University	Occupation Scholar in Residence	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Thomas F Curnin		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 40 Ocean Avenue		Transaction ID: C6690790
City Larchmont	State NY	Zip Code 10538
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4100.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Ellen Damato		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 6
Mailing Address 112 Winchester Dr		Transaction ID: C6651440
City Yonkers	State NY	Zip Code 10710
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer College of New Rochelle	Occupation Exec. Vice President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Judy Daniels		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 1095 Park Avenue		Transaction ID: C6645361
City State Zip Code New York NY 10128	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Barbara Dannenberg		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 34 Century Ridge Road		Transaction ID: C6644832
City State Zip Code Purchase NY 10577	Amount of Each Receipt this Period 900.00	
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Teacher	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Barbara Dannenberg		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 34 Century Ridge Road		Transaction ID: C6644831
City State Zip Code Purchase NY 10577	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Teacher	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Cecelia Dempsey
Mailing Address 50 Allendale Drive

City State Zip Code
Rye NY 10580

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 0 6

Transaction ID: C6645363

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Lyle Dennis
Mailing Address 11515 Noahs Landing Ct

City State Zip Code
Manassas VA 20112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cavarocchio Russo Dennis
Associates

Occupation
Partner

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1650.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 0 6

Transaction ID: C6652477

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Linda Dresner
Mailing Address 299 N Maple Road

City State Zip Code
Birmingham MI 48009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Store Owner

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642780

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Robin Duke Mailing Address 435 East 52nd Street #2E City State Zip Code New York NY 10022 FEC ID number of contributing federal political committee. C Name of Employer Population Action International Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 06 / 30 / 2006 Transaction ID: C6690778 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Shirley Durst Mailing Address 71 Griffen Avenue City State Zip Code Scarsdale NY 10583 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 06 / 30 / 2006 Transaction ID: C6696772 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Sam Eisenberg Mailing Address 1200 Midland Avenue, Apt. 12D City State Zip Code Bronxville NY 10708 FEC ID number of contributing federal political committee. C Name of Employer Kurzman & Eisenberg Occupation Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 04 / 18 / 2006 Transaction ID: C6639791 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Warren Eisenberg

Mailing Address 245 Hartshorn Dr

City State Zip Code
 Short Hills NJ 07078

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bed, Bath & Beyond

Occupation
Information Requested

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642779

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Wilma Ellenbogen

Mailing Address 777 Pelham Road 2G

City State Zip Code
 New Rochelle NY 10805

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allied Converters Inc.

Occupation
Owner

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 3 / 2 0 0 6

Transaction ID: C6644378

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Gary E. Erlbaum

Mailing Address 44 W. Lancaster Ave, Suite 110

City State Zip Code
 Ardmore PA 19003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greentree Properties

Occupation
Real Estate Developer

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642786

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Leonard Feinstein

Mailing Address 80 Valentines Lane

City State Zip Code
Old Brookville NY 11545

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bed, Bath & Beyond

Occupation
Co-Chairman

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642755

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Celia Felsher

Mailing Address 521 Eagle Knolls Road

City State Zip Code
Larchmont NY 10538

FEC ID number of contributing
federal political committee.

C

Name of Employer
Milbank Tweed

Occupation
Attorney

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 6

Transaction ID: C6638913

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Randolph Fenninger

Mailing Address 9009 Avis Court

City State Zip Code
Vienna VA 22182

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Attorney

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690831

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Peter Fishbein Mailing Address 101 Woodlands Road City State Zip Code Harrison NY 10528 FEC ID number of contributing federal political committee. C Name of Employer Occupation Kaye Scholer LLP Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: C6690813 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Thomas M Fleisch Mailing Address 19 York Road City State Zip Code Larchmont NY 10538 FEC ID number of contributing federal political committee. C Name of Employer Occupation Cromwell Business Manager Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6 Transaction ID: C6644827 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Scott J Fleming Mailing Address 3467 Mildred Drive City State Zip Code Falls Church VA 22042 FEC ID number of contributing federal political committee. C Name of Employer Occupation Georgetown University Assistant to the President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: C6690853 Amount of Each Receipt this Period 150.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)

David Freeman

Mailing Address 5 Glen Eagles Drive

City State Zip Code
 Larchmont NY 10538

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Attorney

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642177

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Amy Friedkin

Mailing Address 44 Montgomery St.
Suite 4100

City State Zip Code
 San Francisco CA 94104

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Volunteer

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642782

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Sally Froelich

Mailing Address 6 Overlook Road

City State Zip Code
 Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690793

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Arlyn Gardner

Mailing Address 350 Grace Church Street

City State Zip Code
 Rye NY 10580

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 8 / 2 0 0 6

Transaction ID: C6646371

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Edward Gardner

Mailing Address 350 Grace Church Street

City State Zip Code
 Rye NY 10580

FEC ID number of contributing
federal political committee.

C

Name of Employer
Industrial Solvents Corpo-
ration

Occupation
President

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 8 / 2 0 0 6

Transaction ID: C6646370

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Martin Geller

Mailing Address 154 East 78th Street

City State Zip Code
 New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642800

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Marjorie Gilbert
Mailing Address 3 Purchase Hills Drive

City State Zip Code
Purchase NY 10577

FEC ID number of contributing
federal political committee.

C

Name of Employer
S.L. Gilbert & Company

Occupation
Chairman/CEO

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 6

Transaction ID: C6638831

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Gregory M. Gill
Mailing Address 11100 Brookes Reserve Rd

City State Zip Code
Upper Marlboro MD 20772

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Cassidy Companies

Occupation
General Counsel and Director

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690838

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Stephen Girsky
Mailing Address 1354 Flagler Drive

City State Zip Code
Mamaroneck NY 10543-4603

FEC ID number of contributing
federal political committee.

C

Name of Employer
General Motors

Occupation
Analyst

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642775

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Lucille Gladstone		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 555 Fifth Avenue		Transaction ID: C6642757
City State Zip Code New York NY 10017	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Madison Equities	Occupation Investor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Gary Goldberg		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 399 Oxford Road		Transaction ID: C6642774
City State Zip Code New Rochelle NY 10804	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Physician	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Dorian Goldman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 835 Hardscrabble Road		Transaction ID: C6642195
City State Zip Code Chappaqua NY 10514	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Bldg. Management	Occupation Principal, Real Estate	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

SUBTOTAL of Receipts This Page (optional)

3600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Dorian Goldman Mailing Address 835 Hardscrabble Road City Chappaqua State NY Zip Code 10514 FEC ID number of contributing federal political committee. C Name of Employer Bldg. Management Occupation Principal, Real Estate Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 4200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 1 / 2 0 0 6 Transaction ID: C6642194 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Robert Goodkind Mailing Address 9 Douglas Circle City Rye State NY Zip Code 10580 FEC ID number of contributing federal political committee. C Name of Employer Goodkind Labaton Rudoff Sucharow Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6 Transaction ID: C6644819 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Yvette Gralla Mailing Address 33 Rockledge Rd. City Hartsdale State NY Zip Code 10530 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6 Transaction ID: C6642761 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

6200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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or each category of the
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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Yvette Gralla		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 33 Rockledge Rd.		Transaction ID: C6642762
City Hartsdale	State NY	Zip Code 10530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1900.00
Name of Employer N/A	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

B. Full Name (Last, First, Middle Initial) Antonia Grumbach		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 320 Central Park West #22B		Transaction ID: C6645687
City New York	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Paterson Belknap Webb & Tyler	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) David Harrison		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1315 Smith Ridge Road		Transaction ID: C6646373
City New Canaan	State CT	Zip Code 06840
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Lowey Dannenberg Bemporad Selinger	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)

2650.00

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SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Daniel Hirschhorn
Mailing Address 800 West Lake Avenue

City State Zip Code
Baltimore MD 21210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Univ. of Maryland

Occupation
Professor

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642790

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Anita Hirsh
Mailing Address 3300 Oakdell Road

City State Zip Code
Studio City CA 91604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Real Estate

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 7 / 2 0 0 6

Transaction ID: C6651441

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Hazel H Holub
Mailing Address 19 Griffin Avenue

City State Zip Code
Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642185

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Marjorie Isaac		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 1 Stoneleigh Plaza, Apt. 2L		Transaction ID: C6642168
City Bronxville	State NY	Zip Code 10708
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer N/A	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1200.00	

B. Full Name (Last, First, Middle Initial) Marjorie Isaac		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 1 Stoneleigh Plaza, Apt. 2L		Transaction ID: C6690796
City Bronxville	State NY	Zip Code 10708
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1200.00	

C. Full Name (Last, First, Middle Initial) Paul Isaac		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 75 Prospect Avenue		Transaction ID: C6696759
City Larchmont	State NY	Zip Code 10538
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Financial Analyst	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3100.00	

SUBTOTAL of Receipts This Page (optional)

2200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Jill Iscol		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 63 Lyndel Road		Transaction ID: C6645360
City Pound Ridge	State NY	Zip Code 10576
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer IF Hummingbird Foundation	Occupation President	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Jill Iscol		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 63 Lyndel Road		Transaction ID: C6645359
City Pound Ridge	State NY	Zip Code 10576
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer IF Hummingbird Foundation	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Barbara Israel		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 21 E 79th Street		Transaction ID: C6647035
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Barbara Israel Garden Antiques	Occupation Owner	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Marvin Israelow

Mailing Address 835 Hardscrabble Road

City State Zip Code
 Chappaqua NY 10514

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Real Estate

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642193

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Marvin Israelow

Mailing Address 835 Hardscrabble Road

City State Zip Code
 Chappaqua NY 10514

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Real Estate

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642192

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Bernard Jaffe

Mailing Address 500 E. Main Street
Suite 1424

City State Zip Code
 Norfolk VA 23510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Real Estate

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642785

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Karen Jaffe Mailing Address 500 E. Main Street Suite 1424 City Norfolk State VA Zip Code 23510 FEC ID number of contributing federal political committee. C Name of Employer Jaffe Caplan Fleder Occupation Real Estate Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6 Transaction ID: C6642788 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Brent Jaquet Mailing Address 3660 Bay Drive City Edgewater State MD Zip Code 21037 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: C6690834 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Stephen Jerome Mailing Address 18 Johnson Court City Cresskill State NJ Zip Code 07626 FEC ID number of contributing federal political committee. C Name of Employer Monroe College Occupation President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6 Transaction ID: C6644826 Amount of Each Receipt this Period 900.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Stephen Jerome		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 18 Johnson Court		Transaction ID: C6644825
City Cresskill	State NJ	Zip Code 07626
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1100.00
Name of Employer Monroe College	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Franklin P. Johnson, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 1411 Edgewood Drive		Transaction ID: C6644382
City Palo Alto	State CA	Zip Code 94301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer HYPRES, Inc.	Occupation Chairman of the Board	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Shelly Kassen		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 315 North Avenue		Transaction ID: C6642789
City Westport	State CT	Zip Code 06880
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Town of Westport	Occupation Selectwoman	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)

4100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Earle Kazis		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 6
Mailing Address 380 Park Avenue		Transaction ID: C6638916
City Rye	State NY	Zip Code 10580
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Earle W. Kazis Assoc. Inc.	Occupation Real Estate Broker	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Helen Kimmel		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 445 Park Avenue Suite 2100		Transaction ID: C6642759
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Martin Kimmel		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 445 Park Avenue Suite 2100		Transaction ID: C6642760
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Ellen Koppelman
Mailing Address 555 Park Avenue #10W

City State Zip Code
New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Investor

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642180

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ellen Koppelman
Mailing Address 555 Park Avenue #10W

City State Zip Code
New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Investor

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642181

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Murray Koppelman
Mailing Address 555 Park Avenue #10W

City State Zip Code
New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eastlake Securities, Inc.

Occupation
President

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642179

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

6300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Murray Koppelman
Mailing Address 555 Park Avenue #10W

City State Zip Code
New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eastlake Securities, Inc.

Occupation
President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642178

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Emily Korzenik
Mailing Address 120 Carthage Road

City State Zip Code
Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fellowship for Jewish Lea-
rning

Occupation
Rabbi

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 8 / 2 0 0 6

Transaction ID: C6644820

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lynn Kroll
Mailing Address 18 Parsonage Point

City State Zip Code
Rye NY 10580

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642183

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Gail A Landauer		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 41 Ethelridge Road		Transaction ID: C6688812
City White Plains	State NY	Zip Code 10605
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Eugene M Lang		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 535 Fifth Avenue Suite 906		Transaction ID: C6690795
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Eugene Lang Foundation	Occupation Executive	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Ruth Lapidus		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 23 Delevan Lane		Transaction ID: C6690784
City Harrison	State NY	Zip Code 10528
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer N/A	Occupation Homemaker	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Ruth Lapidus Mailing Address 23 Delevan Lane City Harrison State NY Zip Code 10528 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00		Date of Receipt MM / DD / YYYY 06 / 30 / 2006 Transaction ID: C6690785 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Deborah S Larkin Mailing Address 237 Loring Avenue City Pelham State NY Zip Code 10803 FEC ID number of contributing federal political committee. C Name of Employer Self Employed Occupation Consultant Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt MM / DD / YYYY 04 / 21 / 2006 Transaction ID: C6642198 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) George J Lederer Mailing Address 5 Foxhall Road City Scarsdale State NY Zip Code 10583 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 06 / 30 / 2006 Transaction ID: C6690851 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Gerard Leeds		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 17 Hilltop Drive East		Transaction ID: C6696784
City Great Neck	State NY	Zip Code 11021
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C		Amount of Each Receipt this Period 100.00
Name of Employer N/A	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3800.00	

B. Full Name (Last, First, Middle Initial) Gerard Leeds		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 17 Hilltop Drive East		Transaction ID: C6696786
City Great Neck	State NY	Zip Code 11021
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C		Amount of Each Receipt this Period 900.00
Name of Employer N/A	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3800.00	

C. Full Name (Last, First, Middle Initial) Gerard Leeds		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 17 Hilltop Drive East		Transaction ID: C6696788
City Great Neck	State NY	Zip Code 11021
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C		Amount of Each Receipt this Period 800.00
Name of Employer N/A	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3800.00	

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Lilo Leeds Mailing Address 17 Hilltop Drive East City State Zip Code Great Neck NY 11021 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 4200.00		Date of Receipt MM / DD / YYYY 06 / 30 / 2006 Transaction ID: C6696781 Amount of Each Receipt this Period 200.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mildred Robbins Leet Mailing Address 54 Riverside Drive City State Zip Code New York NY 10024 FEC ID number of contributing federal political committee. C Name of Employer Self-Employed Occupation Consultant Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 750.00		Date of Receipt MM / DD / YYYY 06 / 30 / 2006 Transaction ID: C6690822 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Joseph Leff Mailing Address 3700 Purchase Street City State Zip Code Purchase NY 10577 FEC ID number of contributing federal political committee. C Name of Employer National Spinning Company Occupation Chairman of the Board Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 3000.00		Date of Receipt MM / DD / YYYY 04 / 21 / 2006 Transaction ID: C6642199 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Joseph Leff

Mailing Address 3700 Purchase Street

City State Zip Code
Purchase NY 10577

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Spinning Company

Occupation
Chairman of the Board

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 0 6

Transaction ID: C6652478

Amount of Each Receipt this Period

900.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Joseph Leff

Mailing Address 3700 Purchase Street

City State Zip Code
Purchase NY 10577

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Spinning Company

Occupation
Chairman of the Board

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 0 6

Transaction ID: C6652479

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Peter M Lehrer

Mailing Address 1070 Constable Drive

City State Zip Code
Mamaroneck NY 10543

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lehrer, LLC

Occupation
Chairman

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642753

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Jerry Levin Mailing Address 15 East 70th Street City New York State NY Zip Code 10021 FEC ID number of contributing federal political committee. C Name of Employer American Household Inc. Occupation Information Requested Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt MM / DD / YYYY 06 / 30 / 2006 Transaction ID: C6690816 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Constance Lieber Mailing Address 1210 Greacen Point Road City Mamaroneck State NY Zip Code 10543 FEC ID number of contributing federal political committee. C Name of Employer NAARSAD Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt MM / DD / YYYY 06 / 30 / 2006 Transaction ID: C6690806 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Stephen Lieber Mailing Address 1210 Greacen Point Road City Mamaroneck State NY Zip Code 10543 FEC ID number of contributing federal political committee. C Name of Employer Alpine Woods Occupation Investment Advisor Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt MM / DD / YYYY 06 / 30 / 2006 Transaction ID: C6690808 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Peter Limburg Mailing Address 219 Bedford - Banksville Road City Bedford State NY Zip Code 10506 FEC ID number of contributing federal political committee. C Name of Employer Self-employed Occupation Writer Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 9 / 2 0 0 6 Transaction ID: C6688821 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Eleanor Litwak Mailing Address 120 Walworth Avenue City Scarsdale State NY Zip Code 10583 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6 Transaction ID: C6650884 Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Helen Lowenstein Mailing Address 5 Oak Lane City Larchmont State NY Zip Code 10538 FEC ID number of contributing federal political committee. C Name of Employer Self-Employed Occupation Clinical Social Worker Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: C6690852 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Gordon MacDougall

Mailing Address 3913 N. Dunbarton Street

City State Zip Code
Arlington VA 22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Beacon Consulting Group
Inc.

Occupation
President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690837

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

David Mandel

Mailing Address 32 Rosalind Place

City State Zip Code
Lawrence NY 11559

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690826

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Eric R. Mandel

Mailing Address 211 E. 70th Street

City State Zip Code
New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Physician

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642773

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Barry Mannis Mailing Address 130 Dorchester Road City Scarsdale State NY Zip Code 10583 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C6642772 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	7		2	0	0	6													
B. Full Name (Last, First, Middle Initial) Alan Manocherian Mailing Address 7 Sound Road City Rye State NY Zip Code 10580 FEC ID number of contributing federal political committee. C Name of Employer Manocherian Brothers Occupation Real Estate Developer Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C6690789 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		3	0		2	0	0	6													
C. Full Name (Last, First, Middle Initial) Bernice Manocherian Mailing Address 135 Central Park West #9C City New York State NY Zip Code 10023 FEC ID number of contributing federal political committee. C Name of Employer Berdar Equities Company Occupation Real Estate Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C6642778 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	7		2	0	0	6													
SUBTOTAL of Receipts This Page (optional) ▶		3500.00																				
TOTAL This Period (last page this line number only) ▶																						

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Donald Manocherian Mailing Address 135 Central Park West City New York State NY Zip Code 10023 FEC ID number of contributing federal political committee. C Name of Employer Self-Employed Occupation Real Estate Developer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 06 / 30 / 2006 Transaction ID: C6717941 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Jeffery Manocherian Mailing Address 135 Central Park West City New York State NY Zip Code 10023 FEC ID number of contributing federal political committee. C Name of Employer Manocherian Brothers Occupation Partner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 04 / 27 / 2006 Transaction ID: C6642781 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Diana Mattson Mailing Address 2 Cottage Road City Mount Kisco State NY Zip Code 10549 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 04 / 18 / 2006 Transaction ID: C6639780 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Daniel Mayers Mailing Address 3222 Woodlawn Drive, NW City Washington State DC Zip Code 20008 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 04 / 18 / 2006 Transaction ID: C6639790 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mark Mioduski Mailing Address 6201 Homespun Lane City Falls Church State VA Zip Code 22044 FEC ID number of contributing federal political committee. C Name of Employer Cornerstone Government Affairs Occupation Vice President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 06 / 30 / 2006 Transaction ID: C6690828 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Arlene Mitchell Mailing Address PO BOX 16006 City Mobile State AL Zip Code 36616 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 04 / 27 / 2006 Transaction ID: C6642787 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Lester Nelson		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 111 Pleasant Ridge Road		Transaction ID: C6642182
City Harrison	State NY	Zip Code 10528
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Nelson, Gordon and Barost-en	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Morris W Offit		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 21 Mayfair Lane		Transaction ID: C6644824
City Greenwich	State CT	Zip Code 06831
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 900.00
Name of Employer Offit Hall Capital Management LLC	Occupation Chairman and Chief Executive Officer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

C. Full Name (Last, First, Middle Initial) Morris W Offit		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 21 Mayfair Lane		Transaction ID: C6644823
City Greenwich	State CT	Zip Code 06831
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1100.00
Name of Employer Offit Hall Capital Management LLC	Occupation Chairman and Chief Executive Officer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Barbara Orentzel
Mailing Address 44 Hillandale Drive

City State Zip Code
New Rochelle NY 10804

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 8 / 2 0 0 6

Transaction ID: C6644818

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David D Parker
Mailing Address 200 East 90th Street

City State Zip Code
New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kleinberg Kaplan Wolff et al

Occupation
Attorney

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642171

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Terry Peel
Mailing Address 6109 Wynnwood Road

City State Zip Code
Bethesda MD 20816

FEC ID number of contributing
federal political committee.

C

Name of Employer
Edinston, Peel & Associates

Occupation
Consultant

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690829

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)

Martin Perl

Mailing Address 14 Oxford Road

City State Zip Code
 New Rochelle NY 10804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southgate Properties

Occupation
Real Estate

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642771

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Lisa Perry

Mailing Address 1 Sutton Place South

City State Zip Code
 New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690820

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Lisa Perry

Mailing Address 1 Sutton Place South

City State Zip Code
 New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690821

Amount of Each Receipt this Period

1900.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Richard Perry		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 1 Sutton Place South		Transaction ID: C6690819
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1900.00
Name of Employer Richard Perry Capital	Occupation Investment Banker	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Richard Perry		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 1 Sutton Place South		Transaction ID: C6690818
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Richard Perry Capital	Occupation Investment Banker	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Sarah Peter		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6
Mailing Address 575 Madison Avenue 10th Floor		Transaction ID: C6644835
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Artist	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Robert Philipson		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address PO BOX 242 Hudson House		Transaction ID: C6690775
City Ardsley-on-Hudson	State NY	Zip Code 10503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) Lester Pollack		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 30 Rockefeller Plaza 50th Floor		Transaction ID: C6642758
City New York	State NY	Zip Code 10020
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Centre Partners	Occupation Investment Banking	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) John Pomerantz		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 19 Winfield Avenue		Transaction ID: C6690810
City Harrison	State NY	Zip Code 10528
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Leslie Fay Companies Inc.	Occupation Executive	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Donald Rabinovitch
Mailing Address 860 UN Plaza, Apt. 20G

City State Zip Code
New York NY 10017

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFP Imaging

Occupation
President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6696780

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Burton Resnick
Mailing Address 110 East 59th Street
37th Floor

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jack Resnick & Sons

Occupation
Real Estate

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642187

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Burton Resnick
Mailing Address 110 East 59th Street
37th Floor

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jack Resnick & Sons

Occupation
Real Estate

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642186

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) David Rhodes		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 305 East 24th Street		Transaction ID: C6690780
City New York	State NY	Zip Code 10010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer School of Visual Arts	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) David Rhodes		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 305 East 24th Street		Transaction ID: C6690781
City New York	State NY	Zip Code 10010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer School of Visual Arts	Occupation President	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Gertrude F Rothschild		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 153 Old Colony Road		Transaction ID: C6652476
City Hartsdale	State NY	Zip Code 10530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Columbia University	Occupation Professor	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Jack Rudin Mailing Address 241 Central Park West City State Zip Code New York NY 10024 FEC ID number of contributing federal political committee. C Name of Employer Rudin Management Occupation Real Estate Developer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 1 / 2 0 0 6 Transaction ID: C6642189 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Domenic R. Ruscio Mailing Address Cavarocchi, Ruscio, Dennis Associa 6100 Westchester Drive City State Zip Code College Park MD 20740 FEC ID number of contributing federal political committee. C Name of Employer Cavarocchio, Ruscio, Denn- is Associatie Occupation Partner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1650.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: C6690833 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Arthur Sarnoff Mailing Address 151 Central Park West City State Zip Code New York NY 10023 FEC ID number of contributing federal political committee. C Name of Employer Bruno Appliance Corporati- on Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6 Transaction ID: C6642751 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Joan Scheuer

Mailing Address 21 Willow Avenue

City State Zip Code
 Larchmont NY 10538

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690797

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Irwin Schneiderman

Mailing Address 80 Pine Street

City State Zip Code
 New York NY 10005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cahill Gordon & Reindel

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690788

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Sara Lee Schupf

Mailing Address 1021 Park Avenue

City State Zip Code
 New York NY 10028

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Science Advocate

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690786

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Sara Lee Schupf
Mailing Address 1021 Park Avenue

City State Zip Code
New York NY 10028

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Science Advocate

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690787

Amount of Each Receipt this Period

1900.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Janet Segal
Mailing Address 19 Huguenot Drive

City State Zip Code
Larchmont NY 10538

FEC ID number of contributing
federal political committee.

C

Name of Employer
Four Winds Hospital

Occupation

Chief Operating Officer

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 6

Transaction ID: C6638917

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Sarene Shanus
Mailing Address 347 Orienta Avenue

City State Zip Code
Mamaroneck NY 10543

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harlorn, LLC

Occupation

Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690794

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Sol Shanus

Mailing Address 4214 Live Oak Boulevard

City State Zip Code
 Delray Beach FL 33445

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642184

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Ricky Shechtel

Mailing Address 33 Witherspoon Street
 3rd Floor

City State Zip Code
 Princeton NJ 08542

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642784

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Kenneth Sherman

Mailing Address 85 Old Orchar Road

City State Zip Code
 New Rochelle NY 10804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642176

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. William Shulevitz

Mailing Address 15 West 81st Street #11F

City State Zip Code
 New York NY 10024

FEC ID number of contributing federal political committee.

C

Name of Employer Information Requested

Occupation Information Requested

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642754

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Seth Siegel

Mailing Address 300 Central Park West
Apt 7-A

City State Zip Code
 New York NY 10024

FEC ID number of contributing federal political committee.

C

Name of Employer Information Requested

Occupation Information Requested

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642799

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Jack Stadler

Mailing Address 1030 Constable Drive

City State Zip Code
 Mamaroneck NY 10543

FEC ID number of contributing federal political committee.

C

Name of Employer
N/AOccupation
Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 2 1 / 2 0 0 6

Transaction ID: C6642196

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)

Jeffrey Stern

Mailing Address 39 Park Road

City State Zip Code
 Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Forum Capital Partners

Occupation
Managing Director

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690815

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Mark Stoopler

Mailing Address 14 Trapping Way

City State Zip Code
 Pleasantville NY 10570

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbia University Medic-
al Center

Occupation
Physician

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 0 3 / 2 0 0 6

Transaction ID: C6644377

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Linda Stulberg

Mailing Address 34038 Glouster Cir.

City State Zip Code
 Farmington Hills MI 48331

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642783

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Frances Sweeney Mailing Address 812 Fifth Avenue Apt. 7B City State Zip Code New York NY 10021 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 9 / 2 0 0 6 Transaction ID: C6688807 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Frances Sweeney Mailing Address 812 Fifth Avenue Apt. 7B City State Zip Code New York NY 10021 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 9 / 2 0 0 6 Transaction ID: C6688808 Amount of Each Receipt this Period 1900.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Roselyne Swig Mailing Address 3710 Washington St City State Zip Code San Francisco CA 94118 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 6 Transaction ID: C6644829 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) David Tanner		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 6
Mailing Address 8 Pheasants Run		Transaction ID: C6639792
City Harrison	State NY	Zip Code 10528
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer Quadrangle Group LLC	Occupation Private Equity	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

B. Full Name (Last, First, Middle Initial) David Tanner		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 6
Mailing Address 8 Pheasants Run		Transaction ID: C6639793
City Harrison	State NY	Zip Code 10528
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer Quadrangle Group LLC	Occupation Private Equity	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

C. Full Name (Last, First, Middle Initial) Maurice Tempelman		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 6
Mailing Address Leon Tempelman and Son 19 W. 44th Street		Transaction ID: C6651443
City New York	State NY	Zip Code 10036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Leon Tempelman & Son, In- c.	Occupation Executive	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

SUBTOTAL of Receipts This Page (optional)

5200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Marilyn A. Berry Thompson
Mailing Address 236 Westwood Drive

City State Zip Code
Annapolis MD 21401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jordan Burt

Occupation
Attorney/Government Relations

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690841

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Stanley Wasserman
Mailing Address 214 Tenor Drive

City State Zip Code
New Rochelle NY 10804

FEC ID number of contributing
federal political committee.

C

Name of Employer
S. W. Management, LLC

Occupation
Real Estate

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642770

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Charles Weinberg
Mailing Address 56 Old Colony Road

City State Zip Code
Hartsdale NY 10530

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690791

Amount of Each Receipt this Period

600.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Charles Weinberg
Mailing Address 56 Old Colony Road

City State Zip Code
Hartsdale NY 10530

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690792

Amount of Each Receipt this Period

1400.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Constance Weissman
Mailing Address 805 Taylors Lane

City State Zip Code
Mamaroneck NY 10543

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642801

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Robert R. Wiener
Mailing Address 875 Mamaroneck Avenue

City State Zip Code
Mamaroneck NY 10543

FEC ID number of contributing
federal political committee.

C

Name of Employer
J.R.D. Management Corp.

Occupation
Chairman

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642769

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial)

Dorothy Zaro

Mailing Address 5 Rigene Road

City

Harrison

State

NY

Zip Code

10528

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	0	6

Transaction ID: C6642197

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

185000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 121

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street

City State Zip Code
Washington DC 20003
FEC ID number of contributing
federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
273.92

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 6

Transaction ID: C6698918

Amount of Each Receipt this Period

5.80

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Fundraising Services

B. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street

City State Zip Code
Washington DC 20003
FEC ID number of contributing
federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
273.92

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6717940

Amount of Each Receipt this Period

43.32

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Fundraising Services

SUBTOTAL of Receipts This Page (optional)

49.12

TOTAL This Period (last page this line number only)

49.12

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 121

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. American Academy of Audiology, Inc. PAC

Mailing Address 11730 Plaza American Dr Ste 300

City	State	Zip Code
Reston	VA	20190

FEC ID number of contributing
federal political committee.**C** C00342972

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 6		3 0		2 0 0 6

Transaction ID: C6690874

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATMailing Address 222 S PROSPECT AVENUE
C/O FINANCE DEPT

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing
federal political committee.**C** C00173153

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 6		3 0		2 0 0 6

Transaction ID: C6690868

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. American Dental Political Action Committee

Mailing Address 1111 14th Street NW #1100

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing
federal political committee.**C** C00000729

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 6		0 2		2 0 0 6

Transaction ID: C6650888

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**SUBTOTAL** of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. American Federation of Teachers Committee on Polit

Mailing Address 555 New Jersey Avenue NW

City State Zip Code
 Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 1 1 / 2 0 0 6

Transaction ID: C6638820

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. American Federation of Teachers Committee on Polit

Mailing Address 555 New Jersey Avenue NW

City State Zip Code
 Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690873

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. American Hospital Association Political Action Com

Mailing Address 325 Seventh Street NW

City State Zip Code
 Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 8 / 2 0 0 6

Transaction ID: C6646365

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 121

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. American Maritime Officers Voluntary Political Act

Mailing Address 2 W Dixie Hwy

City State Zip Code
Dania Beach FL 33004

FEC ID number of contributing federal political committee. **C** C00027532

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 6

Transaction ID: C6688914

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITIC

Mailing Address 1300 L Street NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 6

Transaction ID: C6688911

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. AMERICAN PSYCHIATRIC ASSOCIATION POLITICAL ACTION

Mailing Address 1000 Woilson Blvd
Suite 1825

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00373696

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6696701

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Americans for Good Government

Mailing Address PO BOX 3128

City State Zip Code
Jasper AL 35502
FEC ID number of contributing
federal political committee.**C** C00138701

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642797

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Association of Professional Flight Attendants PAC

Mailing Address 1004 West Eules Boulevard

City State Zip Code
Eules TX 76040
FEC ID number of contributing
federal political committee.**C** C00246421

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690870

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Association of Trial Lawyers of AmericaMailing Address Political Action Committee
1050 31st Street NW
City State Zip Code
Washington DC 20007
FEC ID number of contributing
federal political committee.**C** C00024521

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690875

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 121

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Boeing Political Action Committee

Mailing Address 1200 Wilson Boulevard

City State Zip Code
Arlington VA 22209
FEC ID number of contributing
federal political committee.**C** C00142711

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690881

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial)
Burlington Northern Santa Fe Corp RAILPACMailing Address Post Office Box 961039
3017 Lou Menk Drive
City State Zip Code
Fort Worth TX 76102
FEC ID number of contributing
federal political committee.**C** C00235739

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6696692

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial)
Ch2m Hill Companies Ltd Pac

Mailing Address 9191 South Jamaica Street

City State Zip Code
Englewood CO 80112
FEC ID number of contributing
federal political committee.**C** C00143305

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690882

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 121

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Citizens For Global SolutionsMailing Address C/o Citizens For Global Solutions
418 7th Street SECity State Zip Code
Washington DC 20003FEC ID number of contributing
federal political committee.**C** C00043992

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6696743

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Credit Suisse First Boston Government Action Fund

Mailing Address 1155 21ST STREET NW SUITE 300

City State Zip Code
Washington DC 20036FEC ID number of contributing
federal political committee.**C** C00111559

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 6

Transaction ID: C6688930

Amount of Each Receipt this Period

4000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Credit Union Legislative Action Council

Mailing Address 601 Pennsylvania Ave, NW, Ste. 600

City State Zip Code
Washington DC 20004FEC ID number of contributing
federal political committee.**C** C00007880

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690878

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**SUBTOTAL** of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 121

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. DRIVE Political Fund - TEAMSTERS

Mailing Address 25 Louisiana Avenue NW

City State Zip Code
 Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00011957

Name of Employer Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 9 / 2 0 0 6

Transaction ID: C6688924

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Florida Congressional Committee

Mailing Address 1380 N.E. Miami Gardens Dr., #207

City State Zip Code
 Miami FL 33179

FEC ID number of contributing federal political committee. **C** C00127811

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 6

Transaction ID: C6642796

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Heineken USA Good Government Fund

Mailing Address 360 Hamilton Avenue, Suite 1103

City State Zip Code
 White Plains NY 10601

FEC ID number of contributing federal political committee. **C** C00358234

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690876

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 121

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
J. P. MORGAN CHASE & CO. PAC

Mailing Address 270 Park Avenue
21st Floor

City State Zip Code
New York NY 10017

FEC ID number of contributing
federal political committee. **C** C00128512

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690867

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
MCALLISTER AND QUINN PAC

Mailing Address 1133 CONNECTICUT AVENUE NW STE 725

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing
federal political committee. **C** C00418913

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
243.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6696753

Amount of Each Receipt this Period

243.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: In-kind fundraising support

C. Full Name (Last, First, Middle Initial)
NAPUS PAC for Postmasters

Mailing Address 8 Herbert Street

City State Zip Code
Alexandria VA 22305

FEC ID number of contributing
federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690871

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2243.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 121

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
National PAC

Mailing Address P.O. Box 15316

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee. **C** C00150995

Name of Employer Occupation

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 3000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6717942

Amount of Each Receipt this Period

3000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
NELSON, MULLINS, RILEY & SCARBOROUGH FEDERAL POLIT

Mailing Address 1320 MAIN STREET, 17TH FLOOR
 PO BOX 11070

City State Zip Code
COLUMBIA SC 29201

FEC ID number of contributing
federal political committee. **C** C00278895

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6696741

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION C

Mailing Address 51 Madison Ave.
 Room 1900

City State Zip Code
New York NY 10010

FEC ID number of contributing
federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 6000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6696750

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 121

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION CMailing Address 51 Madison Ave.
Room 1900City State Zip Code
New York NY 10010FEC ID number of contributing
federal political committee.**C** C00158881

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6696751

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**B.** Full Name (Last, First, Middle Initial)

Powers Pyles Sutter & Verille PAC

Mailing Address 1875 I Street NW 12th fl

City State Zip Code
New York NY 10006FEC ID number of contributing
federal political committee.**C** C00302687

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690869

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**C.** Full Name (Last, First, Middle Initial)
SONNENSCHN NATH & ROSENTHAL POLITICAL ACTION COMMailing Address 1301 K STREET NW
SUITE 600 EAST TOWERCity State Zip Code
WASHINGTON DC 20005FEC ID number of contributing
federal political committee.**C** C00216127

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690866

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**SUBTOTAL** of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 121

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Tercentenary Fund PACMailing Address 111 South 15th Street
Pack Building 12th flCity State Zip Code
Philadelphia PA 19102FEC ID number of contributing
federal political committee.**C** C00162719

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: C6645688

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Treasury Employees Political Action Committee

Mailing Address 901 E Street NW #600

City State Zip Code
Washington DC 20004FEC ID number of contributing
federal political committee.**C** C00107128

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6690879

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. United Food & Commercial Workers, ABC

Mailing Address 1775 K Street, NW

City State Zip Code
Washington DC 20006FEC ID number of contributing
federal political committee.**C** C00002766

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 0 6

Transaction ID: C6638819

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**SUBTOTAL** of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 121

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial)

WAI PAC

Mailing Address Women's Alliance For Israel
30151 Tomas Street

City Rancho Santa Marga State CA Zip Code 92688

FEC ID number of contributing
federal political committee.

C C00236596

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6696703

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

39493.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 121

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO BOX 15124

City

Albany

State

NY

Zip Code

12212

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

318.73

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 0 6

Transaction ID: C6652486

Amount of Each Receipt this Period

318.73

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

318.73

TOTAL This Period (last page this line number only)

318.73

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 121

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Chase Manhattan Bank

Mailing Address 349 Fifth Avenue

City

New York

State

NY

Zip Code

10016-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

286.77

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: C6717948

Amount of Each Receipt this Period

21.21

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Chase Manhattan Bank

Mailing Address 349 Fifth Avenue

City

New York

State

NY

Zip Code

10016-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

286.77

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 6

Transaction ID: C6717949

Amount of Each Receipt this Period

22.40

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Chase Manhattan Bank

Mailing Address 349 Fifth Avenue

City

New York

State

NY

Zip Code

10016-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

286.77

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: C6717950

Amount of Each Receipt this Period

21.66

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

65.27

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 121

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)

Citibank, N.A.

Mailing Address PO Box 5870

City State Zip Code
 New York NY 10163

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

21411.78

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 6

Transaction ID: C6717945

Amount of Each Receipt this Period

1158.48

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Citibank, N.A.

Mailing Address PO Box 5870

City State Zip Code
 New York NY 10163

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

21411.78

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 8 / 2 0 0 6

Transaction ID: C6717946

Amount of Each Receipt this Period

1199.43

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Citibank, N.A.

Mailing Address PO Box 5870

City State Zip Code
 New York NY 10163

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

21411.78

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: C6717947

Amount of Each Receipt this Period

1162.99

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3520.90

TOTAL This Period (last page this line number only)

3586.17

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. African American Chamber of Commerce

Mailing Address PO Box 9029

City State Zip Code
Mt. Vernon NY 10552

Purpose of Disbursement
Journal Advertisement
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108457

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. American Express Merchant Services

Mailing Address PO Box 53852

City State Zip Code
Phoenix AZ 85072

Purpose of Disbursement
Merchant Fees
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108476

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. American Express Merchant Services

Mailing Address PO Box 53852

City State Zip Code
Phoenix AZ 85072

Purpose of Disbursement
Merchant Fees
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108379

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. American Express Merchant Services

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108380

Date of Disbursement

/ /

Amount of Each Disbursement this Period

119.53

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. American Express Merchant Services

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108382

Date of Disbursement

/ /

Amount of Each Disbursement this Period

210.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. American Express Merchant Services

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108391

Date of Disbursement

/ /

Amount of Each Disbursement this Period

147.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

476.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. American Express Merchant Services

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement

Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108437

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Anthony Maggiacomo Lodge 2320 OSIA

Mailing Address Attn: Journal Ads 885 Midland Ave

City Yonkers State NY Zip Code 10704

Purpose of Disbursement

Journal Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108461

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Beta Parking

Mailing Address 545 5th Avenue

City New York State NY Zip Code 10017

Purpose of Disbursement

Monthly Parking

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108442

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Beta Parking

Mailing Address 545 5th Avenue

City State Zip Code
New York NY 10017

Purpose of Disbursement

Monthly Parking

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108408

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Chase Manhattan Bank

Mailing Address 349 Fifth Avenue

City State Zip Code
New York NY 10016-0001

Purpose of Disbursement

Bank Service Charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108430

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12.21

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Chase Manhattan Bank

Mailing Address 349 Fifth Avenue

City State Zip Code
New York NY 10016-0001

Purpose of Disbursement

Bank Service Charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108474

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.85

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

223.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Chase Manhattan Bank

Mailing Address 349 Fifth Avenue

City State Zip Code
New York NY 10016-0001

Purpose of Disbursement
Bank Service Charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108511

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11.02

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Chase Merchant Services

Mailing Address 45 Knollwood Road

City State Zip Code
Elmsford NY 10523

Purpose of Disbursement
Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108475

Date of Disbursement

/ /

Amount of Each Disbursement this Period

85.69

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Chase Merchant Services

Mailing Address 45 Knollwood Road

City State Zip Code
Elmsford NY 10523

Purpose of Disbursement
Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108436

Date of Disbursement

/ /

Amount of Each Disbursement this Period

472.91

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

569.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Chase Merchant Services

Mailing Address 45 Knollwood Road

City Elmsford State NY Zip Code 10523

Purpose of Disbursement

Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108377

Date of Disbursement

/ /

Amount of Each Disbursement this Period

73.05

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. CTS Holdings, LLC

Mailing Address 2525 Horizon Lake Drive, Suite 120

City Memphis State TN Zip Code 38133

Purpose of Disbursement

Merchant Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108381

Date of Disbursement

/ /

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. CTS Holdings, LLC

Mailing Address 2525 Horizon Lake Drive, Suite 120

City Memphis State TN Zip Code 38133

Purpose of Disbursement

Merchant Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108443

Date of Disbursement

/ /

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

143.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. CTS Holdings, LLC

Mailing Address 2525 Horizon Lake Drive, Suite 120

City State Zip Code
Memphis TN 38133

Purpose of Disbursement

Merchant Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108478

Date of Disbursement

/ /

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Deer Park Spring Water

Mailing Address Processing Center
PO Box 52271

City State Zip Code
Phoenix AZ 85072-2271

Purpose of Disbursement

Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108438

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.49

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Deer Park Spring Water

Mailing Address Processing Center
PO Box 52271

City State Zip Code
Phoenix AZ 85072-2271

Purpose of Disbursement

Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108411

Date of Disbursement

/ /

Amount of Each Disbursement this Period

13.98

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

69.47

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108206

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	6

Amount of Each Disbursement this Period

5.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

* in-kind received

Full Name (Last, First, Middle Initial)

B. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108375

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	6

Amount of Each Disbursement this Period

43.32

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

* in-kind received

Full Name (Last, First, Middle Initial)

C. Eastern Collection Corporation

Mailing Address 1626 Locust Ave

City Bohemia State NY Zip Code 11716

Purpose of Disbursement
Phone Service

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108452

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	9	/	2	0	0	6

Amount of Each Disbursement this Period

641.09

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

690.21

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Sarah Eckstein		Transaction ID: D108470 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 0 / 2 0 0 6</div> </div>
Mailing Address 15 Carlin Street		Amount of Each Disbursement this Period <div>1077.64</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Norwalk State CT Zip Code 06851		
Purpose of Disbursement Payroll Expense	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Sarah Eckstein		Transaction ID: D108484 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 4 / 2 0 0 6</div> </div>
Mailing Address 15 Carlin Street		Amount of Each Disbursement this Period <div>1077.64</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Norwalk State CT Zip Code 06851		
Purpose of Disbursement Payroll Expense	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Sarah Eckstein		Transaction ID: D108500 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 8 / 2 0 0 6</div> </div>
Mailing Address 15 Carlin Street		Amount of Each Disbursement this Period <div>65.33</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Norwalk State CT Zip Code 06851		
Purpose of Disbursement Healthcare Insurance Reimbursement	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

2220.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Sarah Eckstein

Mailing Address 15 Carlin Street

City
Norwalk

State
CT

Zip Code
06851

Purpose of Disbursement
Healthcare Insurance Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108501

Date of Disbursement

/ /

Amount of Each Disbursement this Period

65.33

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Sarah Eckstein

Mailing Address 15 Carlin Street

City
Norwalk

State
CT

Zip Code
06851

Purpose of Disbursement
Payroll Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108509

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1077.64

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Sarah Eckstein

Mailing Address 15 Carlin Street

City
Norwalk

State
CT

Zip Code
06851

Purpose of Disbursement
Healthcare Insurance Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108394

Date of Disbursement

/ /

Amount of Each Disbursement this Period

65.33

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1208.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Sarah Eckstein

Mailing Address 15 Carlin Street

City
Norwalk

State
CT

Zip Code
06851

Purpose of Disbursement

Payroll Expense

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D108392

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1077.64

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Sarah Eckstein

Mailing Address 15 Carlin Street

City
Norwalk

State
CT

Zip Code
06851

Purpose of Disbursement

Payroll Expense

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D108446

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1077.64

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Sarah Eckstein

Mailing Address 15 Carlin Street

City
Norwalk

State
CT

Zip Code
06851

Purpose of Disbursement

Healthcare Insurance Reimbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D108433

Date of Disbursement

/ /

Amount of Each Disbursement this Period

65.33

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2220.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Sarah Eckstein		Transaction ID: D108428 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 8 / 2 0 0 6</div> </div>
Mailing Address 15 Carlin Street		Amount of Each Disbursement this Period <div>1077.64</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Norwalk State CT Zip Code 06851		
Purpose of Disbursement Payroll Expense	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) FEDEX		Transaction ID: D108425 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 4 / 2 0 0 6</div> </div>
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period <div>61.68</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Memphis State TN Zip Code 38101		
Purpose of Disbursement Deliveries	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) FEDEX		Transaction ID: D108426 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 4 / 2 0 0 6</div> </div>
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period <div>66.43</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Memphis State TN Zip Code 38101		
Purpose of Disbursement Deliveries	<input type="checkbox"/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1205.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A. FEDEX Full Name (Last, First, Middle Initial) Mailing Address PO BOX 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108449 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 29.26 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. FEDEX Full Name (Last, First, Middle Initial) Mailing Address PO BOX 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108439 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 46.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C. FEDEX Full Name (Last, First, Middle Initial) Mailing Address PO BOX 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108385 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 6 Amount of Each Disbursement this Period 16.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

92.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A. FEDEX Full Name (Last, First, Middle Initial) Mailing Address PO BOX 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108386 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 6 Amount of Each Disbursement this Period 54.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. FEDEX Full Name (Last, First, Middle Initial) Mailing Address PO BOX 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108387 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 6 Amount of Each Disbursement this Period 22.46 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C. FEDEX Full Name (Last, First, Middle Initial) Mailing Address PO BOX 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108388 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 6 Amount of Each Disbursement this Period 46.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

124.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A. FEDEX Full Name (Last, First, Middle Initial) Mailing Address PO BOX 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108389 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 6 Amount of Each Disbursement this Period 25.29 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. FEDEX Full Name (Last, First, Middle Initial) Mailing Address PO BOX 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108455 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 6 Amount of Each Disbursement this Period 14.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C. FMBS Merchant Services Full Name (Last, First, Middle Initial) Mailing Address 2 Westbrook Drive Suite 200 City Westchester State IL Zip Code 60154 Purpose of Disbursement Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108477 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6 Amount of Each Disbursement this Period 30.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

70.11

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. FMBS Merchant Services

Mailing Address 2 Westbrook Drive Suite 200

City Westchester State IL Zip Code 60154

Purpose of Disbursement

Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108376

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. FMBS Merchant Services

Mailing Address 2 Westbrook Drive Suite 200

City Westchester State IL Zip Code 60154

Purpose of Disbursement

Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108435

Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Ford Credit

Mailing Address PO Box 220564

City Pittsburgh State PA Zip Code 15257-2564

Purpose of Disbursement

Monthly Car Lease

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108441

Date of Disbursement

/ /

Amount of Each Disbursement this Period

345.99

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

405.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Ford Credit

Mailing Address PO Box 220564

City Pittsburgh State PA Zip Code 15257-2564

Purpose of Disbursement
Monthly Car Lease Closeout

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108383

Date of Disbursement

/ /

Amount of Each Disbursement this Period

345.99

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Ford Credit

Mailing Address PO Box 220564

City Pittsburgh State PA Zip Code 15257-2564

Purpose of Disbursement
Monthly Car Lease

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108498

Date of Disbursement

/ /

Amount of Each Disbursement this Period

345.99

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. G.E. Capital

Mailing Address PO BOX 642111

City Pittsburgh State PA Zip Code 15264

Purpose of Disbursement
Equipment Rental

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108384

Date of Disbursement

/ /

Amount of Each Disbursement this Period

180.21

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

872.19

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. G.E. Capital

Mailing Address PO BOX 642111

City Pittsburgh State PA Zip Code 15264

Purpose of Disbursement
Equipment Rental

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108447

Date of Disbursement

/ /

Amount of Each Disbursement this Period

180.21

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. G.E. Capital

Mailing Address PO BOX 642111

City Pittsburgh State PA Zip Code 15264

Purpose of Disbursement
Equipment Rental

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108427

Date of Disbursement

/ /

Amount of Each Disbursement this Period

202.21

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Good Samaritan Hospital Foundation

Mailing Address 255 Lafayette Ave

City Suffern State NY Zip Code 10901

Purpose of Disbursement
Event Sponsorship

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108490

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

632.42

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Jewish Media Group

Mailing Address 1086 Teaneck Road

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement

Journal Advertisement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108496

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	0	6

Amount of Each Disbursement this Period

194.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. KeyCorp Corporate Real Estate

Mailing Address PO BOX 6367

City Cleveland State OH Zip Code 44101

Purpose of Disbursement

Rent

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108440

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	0	6

Amount of Each Disbursement this Period

1466.66

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. KeyCorp Corporate Real Estate

Mailing Address PO BOX 6367

City Cleveland State OH Zip Code 44101

Purpose of Disbursement

Rent

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108410

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	6

Amount of Each Disbursement this Period

1466.66

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

3127.32

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Janica L. Kyriacopoulos

Mailing Address 5304 McKinley Street

City Bethesda State MD Zip Code 20814-1414

Purpose of Disbursement

Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108434

Date of Disbursement

/ /

Amount of Each Disbursement this Period

510.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Le Amiche Lodge #2550

Mailing Address 83 Lawrence Park Crescent

City Yonkers State NY Zip Code 10708

Purpose of Disbursement

Journal Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108503

Date of Disbursement

/ /

Amount of Each Disbursement this Period

125.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. MCALLISTER AND QUINN PAC

Mailing Address 1133 CONNECTICUT AVENUE NW STE 725

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement

Fundraising Support

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D107690

Date of Disbursement

/ /

Amount of Each Disbursement this Period

243.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

* in-kind received

SUBTOTAL of Disbursements This Page (optional)

878.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. NetCampaign, LLC

Mailing Address 718 7th Street, NW
Suite 300

City Washington State DC Zip Code 20001

Purpose of Disbursement
Web Hosting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108407

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. NetCampaign, LLC

Mailing Address 718 7th Street, NW
Suite 300

City Washington State DC Zip Code 20001

Purpose of Disbursement
Web Hosting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108450

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. New City Jewish Center

Mailing Address 47 Old Schoolhouse Road

City New City State NY Zip Code 10956

Purpose of Disbursement
Journal Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108458

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

465.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. NGP Software, Inc.

Mailing Address 5039 Connecticut Ave, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement
Software Rental Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108409

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	6

Amount of Each Disbursement this Period

1500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Noam Bramson

Mailing Address 201 Pinebrook Boulevard

City New Rochelle State NY Zip Code 10804

Purpose of Disbursement
Political Consulting Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108395

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	6

Amount of Each Disbursement this Period

4583.33

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Noam Bramson

Mailing Address 201 Pinebrook Boulevard

City New Rochelle State NY Zip Code 10804

Purpose of Disbursement
Political Consulting Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108432

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	6

Amount of Each Disbursement this Period

4583.33

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

10666.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Noam Bramson

Mailing Address 201 Pinebrook Boulevard

City State Zip Code
New Rochelle NY 10804

Purpose of Disbursement
Political Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108482

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4583.33

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Northern Westchester Shelter

Mailing Address PO Box 203

City State Zip Code
Pleasantville NY 10570

Purpose of Disbursement
Journal Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108405

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Paychex, Inc.

Mailing Address 100 Painters Mill Road
PO Box 388

City State Zip Code
Owings Mills MD 21117

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108393

Date of Disbursement

/ /

Amount of Each Disbursement this Period

404.81

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

5188.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Paychex, Inc.

Mailing Address 100 Painters Mill Road
PO Box 388

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
Payroll Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108390

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.32

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Paychex, Inc.

Mailing Address 100 Painters Mill Road
PO Box 388

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108451

Date of Disbursement

/ /

Amount of Each Disbursement this Period

401.25

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Paychex, Inc.

Mailing Address 100 Painters Mill Road
PO Box 388

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
Payroll Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108444

Date of Disbursement

/ /

Amount of Each Disbursement this Period

102.04

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

653.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Paychex, Inc.

Mailing Address 100 Painters Mill Road
PO Box 388

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108429

Date of Disbursement

/ /

Amount of Each Disbursement this Period

407.44

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Paychex, Inc.

Mailing Address 100 Painters Mill Road
PO Box 388

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement

Payroll Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108483

Date of Disbursement

/ /

Amount of Each Disbursement this Period

98.26

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Paychex, Inc.

Mailing Address 100 Painters Mill Road
PO Box 388

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108485

Date of Disbursement

/ /

Amount of Each Disbursement this Period

401.25

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

906.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Paychex, Inc.

Mailing Address 100 Painters Mill Road
PO Box 388

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108473

Date of Disbursement

/ /

Amount of Each Disbursement this Period

401.25

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Paychex, Inc.

Mailing Address 100 Painters Mill Road
PO Box 388

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108510

Date of Disbursement

/ /

Amount of Each Disbursement this Period

401.25

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. PCMS, LLC

Mailing Address 5304 McKinley Street

City Bethesda State MD Zip Code 20814

Purpose of Disbursement

Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108479

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2261.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

3063.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. PCMS, LLC

Mailing Address 5304 McKinley Street

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108423

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3612.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Peake DeLancey Printers LLC

Mailing Address 2500 Schuster Drive

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Printing and Mailing Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108424

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2669.85

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Peake DeLancey Printers LLC

Mailing Address 2500 Schuster Drive

City Cheverly State MD Zip Code 20781

Purpose of Disbursement
Postage for Mailing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108378

Date of Disbursement

/ /

Amount of Each Disbursement this Period

897.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

7179.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Peake DeLancey Printers LLC

Mailing Address 2500 Schuster Drive

City State Zip Code
Cheverly MD 20781

Purpose of Disbursement
Printing and Mailing Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108508

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5148.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Port Chester-Rye Brook Chamber of Commerce

Mailing Address 110 Willett Ave

City State Zip Code
Port Chester NY 10573

Purpose of Disbursement
Journal Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108466

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Rockland County Times

Mailing Address 119 Main St 2nd FL

City State Zip Code
Nanuet NY 10954

Purpose of Disbursement
Journal Advertisements

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108403

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

5498.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Scarsdale and Edgemont Family Counseling

Mailing Address Services 26 Hadden Road

City Scarsdale State NY Zip Code 10583

Purpose of Disbursement

Journal Advertisement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108467

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	9	/	2	0	0	6

Amount of Each Disbursement this Period

175.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. State Insurance Fund

Mailing Address Workers' Compensation PO Box 4788

City Syracuse State NY Zip Code 13221-4788

Purpose of Disbursement

Workers' Comp Insurance

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108421

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	6	/	2	0	0	6

Amount of Each Disbursement this Period

818.37

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. TerraPathMailing Address 350 Theodore Fremd Avenue
Suite 300

City Rye State NY Zip Code 10580

Purpose of Disbursement

Computer Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108448

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	6

Amount of Each Disbursement this Period

125.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1118.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A. TerraPath Full Name (Last, First, Middle Initial) Mailing Address 350 Theodore Fremd Avenue Suite 300 City Rye State NY Zip Code 10580 Purpose of Disbursement Computer Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108453 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 6 Amount of Each Disbursement this Period 187.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. The Frost Group Full Name (Last, First, Middle Initial) Mailing Address 2737 Devonshire Place, NW #325 City Washington State DC Zip Code 20008 Purpose of Disbursement Fundraising Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108481 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6 Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C. The Frost Group Full Name (Last, First, Middle Initial) Mailing Address 2737 Devonshire Place, NW #325 City Washington State DC Zip Code 20008 Purpose of Disbursement Fundraising Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108431 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

10187.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. The Frost Group

Mailing Address 2737 Devonshire Place, NW #325

City Washington State DC Zip Code 20008

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108396

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. The Rockland Bulletin

Mailing Address 50 Melnick Dr.

City Monsey State NY Zip Code 10952

Purpose of Disbursement
Journal Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108401

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Ukranian Heritage Festival

Mailing Address 34 Homewood Avenue

City Yonkers State NY Zip Code 10701

Purpose of Disbursement
Journal Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108463

Date of Disbursement

/ /

Amount of Each Disbursement this Period

125.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

5375.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO BOX 489

City
Newark

State
NJ

Zip Code
07101

Purpose of Disbursement

Cell Phone Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108412

Date of Disbursement

/ /

Amount of Each Disbursement this Period

54.08

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address PO BOX 15124

City
Albany

State
NY

Zip Code
12212

Purpose of Disbursement

Office Phone Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108454

Date of Disbursement

/ /

Amount of Each Disbursement this Period

416.35

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Westchester Children's Association

Mailing Address 175 Main Street, Ste 702

City
White Plains

State
NY

Zip Code
10601

Purpose of Disbursement

Journal Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108402

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

620.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Westchester County Democratic Comm

Mailing Address 170 East Post Road #210

City State Zip Code
White Plains NY 10601

Purpose of Disbursement
Journal Advertisement
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108493

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Westchester Hispanic Law Enforcement Assoc.

Mailing Address PO BOX 1292

City State Zip Code
White Plains NY 10602

Purpose of Disbursement
Journal Advertisement
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108506

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Westchester Jewish Chronicle

Mailing Address 141 Halstead Avenue

City State Zip Code
Mamaroneck NY 10543

Purpose of Disbursement
Journal Advertisement
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108495

Date of Disbursement

/ /

Amount of Each Disbursement this Period

625.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2325.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Women's Club of White Plains

Mailing Address 305 Ridgeway

City State Zip Code
White Plains NY 10605

Purpose of Disbursement

Event Facility Rental

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108499

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. YMCA of Yonkers

Mailing Address 17 Riverdale Avenue

City State Zip Code
Yonkers NY 10701

Purpose of Disbursement

Journal Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108400

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO BOX 1270

City State Zip Code
Newark NJ 07101

Purpose of Disbursement

Credit Card Payment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108413

Date of Disbursement

/ /

Amount of Each Disbursement this Period

441.06

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1641.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO BOX 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement

Membership Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108418

Date of Disbursement

04 / 16 / 2006

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Expertcity-GOTOMYP

Mailing Address 5385 Hollister Avenue

City Santa Barbara State CA Zip Code 93111

Purpose of Disbursement

Computer Software

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108417

Date of Disbursement

04 / 16 / 2006

Amount of Each Disbursement this Period

19.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. ExxonMobil

Mailing Address 339 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D108419

Date of Disbursement

04 / 16 / 2006

Amount of Each Disbursement this Period

79.19

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address PO BOX 1140

City State Zip Code
Memphis TN 38101

Purpose of Disbursement
Deliveries

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108416

Date of Disbursement

/ /

Amount of Each Disbursement this Period

16.57

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Golden Carriage Limousine

Mailing Address 347 Midland Avenue

City State Zip Code
Rye NY 10580

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108415

Date of Disbursement

/ /

Amount of Each Disbursement this Period

107.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Office Max

Mailing Address 60 South Broadway

City State Zip Code
White Plains NY 10601

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108420

Date of Disbursement

/ /

Amount of Each Disbursement this Period

61.92

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A. USPS Full Name (Last, First, Middle Initial) Mailing Address 620 Mamaroneck Ave City White Plains State NY Zip Code 10605 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108414 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 6 Amount of Each Disbursement this Period 120.68 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B. American Express Full Name (Last, First, Middle Initial) Mailing Address PO BOX 1270 City Newark State NJ Zip Code 07101 Purpose of Disbursement Credit Card Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108456 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 6 Amount of Each Disbursement this Period 468.46 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C. U.S. Postmaster Full Name (Last, First, Middle Initial) Mailing Address 620 Mamaroneck Ave City White Plains State NY Zip Code 10605 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D108469 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 6 Amount of Each Disbursement this Period 468.46 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

468.46

TOTAL This Period (last page this line number only)

71251.68

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Harrison Democratic Committee

Mailing Address PO BOX 686

City
Harrison

State
NY

Zip Code
10528

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108472

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. New Castle Democratic Committee

Mailing Address 39 Garden Ridge

City
Chappaqua

State
NY

Zip Code
10514

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108445

Date of Disbursement

/ /

Amount of Each Disbursement this Period

125.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Ossining Democratic Committee

Mailing Address 36 Ferris Place

City
Ossining

State
NY

Zip Code
10562

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108471

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

875.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Nita Lowey for Congress

Full Name (Last, First, Middle Initial)

A. Rockland County Democratic Committee

Mailing Address PO Box 266

City State Zip Code
New City NY 10956

Purpose of Disbursement

Journal Advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108480

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Westchester County Democratic Comm

Mailing Address 170 East Post Road #210

City State Zip Code
White Plains NY 10601

Purpose of Disbursement

Nonfederal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108494

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Working Families Party - Westchester Cnty

Mailing Address 62 Stratford Lane

City State Zip Code
Hastings on Hudson NY 10706

Purpose of Disbursement

Nonfederal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D108422

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

3375.00